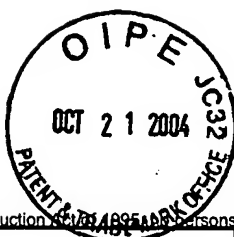


Customer No. 28880



Confirmation No. 5914

PTO/SB/21 (03-03)

Approved for use through 04/30/2003. OMB 0651-0031  
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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10,758,581
	Filing Date	January 15, 2004
	First Named Inventor	Daniel Y Du et al
	Art Unit	
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	PC 25428A

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard Copies of all cited references on SB/08A Copy of PCT Search Report and Written Opin.
Remarks AUTHORIZATION TO CHARGE THE FEE AND ANY ADDITIONAL FEES AS NECESSARY OR CREDIT ANY OVERPAYMENT TO DEPOSIT ACCOUNT 23-0445 IS HEREBY GIVEN.		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	J. Michael Dixon
Signature	
Date	October 18, 2004

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date <u>10-18-2004</u>	
Typed or printed	Diane L. Hetzler
Signature	
Date	10/18/2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PC25428A

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Application No : 10,758,581  
Applicant : Daniel Y. Du, et al  
Filed : January 15, 2004  
TC/A.U. :  
Examiner : Not Yet Known  
Docket No. : PC 25428A  
Customer No. : 28880  
Confirmation No : 5914

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Statement as Provided by 37 CFR 1.97(b)**

Dear Sir:

The Applicants submit that a Supplemental Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of the first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.

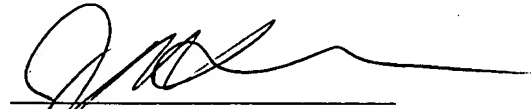
As such, the Applicants respectfully requests consideration of the enclosed Supplemental Information Disclosure Statement and request that all references cited herein be printed on the face of the patent upon grant of the Application.

A copy of the International Search Report and the Written Opinion of the International Searching Authority is enclosed for the Examiner's convenience.

It is understood by the Applicants that this paper requires no fee; however, authorization is given to charge any necessary filing fees and any additional fees or credit any overpayment to Deposit Account 23-0455.

Respectfully submitted,

Dated: 10/18/04



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PTO/SB/08B (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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Substitute for form 1449/PTO

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

**Complete if Known**

Application Number	10/758,581
Filing Date	January 15, 2004
First Named Inventor	Daniel Y. Du et al
Art Unit	
Examiner Name	
Attorney Docket Number	PC25428A

Sheet

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of

1

**NON PATENT LITERATURE DOCUMENTS**

Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
		CHENGALVALA, MUTRY ET AL, Selective androgen receptor modulators, Therapeutic Patents;, Vol. 13, No. 1, 2003, pages 59-66.	

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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